

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new non-provisional applications under 37CFR§1.53(b))

Attorney Docket No.	KLR 1016.2010
First Inventor or Application Identifier	
Tervo, et al.	
Title	LOW-CURRENT POGO PROBE CARD
Express Mail Label No.	EL 915420658 US

## APPLICATION ELEMENTS

**APPLICATION ELEMENTS**  
See MPEP chapter 600 concerning utility patent application contents.

Commissioner for Patents & Trademarks  
ADDRESS TO: Box Patent Application  
Washington, D.C. 20231



<input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>		5. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
<input checked="" type="checkbox"/> Specification		Total pages <div style="border: 1px solid black; padding: 2px; display: inline-block;">27</div>	6. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
<p><i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> <li>- Descriptive Title of the Invention</li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Federally Sponsored Research</li> <li>- Reference to Microfiche Appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings <i>(if filed)</i></li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>			
<input checked="" type="checkbox"/> Drawing(s) (35 USC 113)		Total Pages <div style="border: 1px solid black; padding: 2px; display: inline-block;">13</div>	7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
<input type="checkbox"/> Oath or Declaration		Total Pages <div style="border: 1px solid black; padding: 2px; display: inline-block;">2</div>	8. <input type="checkbox"/> 37 CFR §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <i>when there is an assignee</i>
9. <input type="checkbox"/> English translation document <i>(if applicable)</i>			
<input type="checkbox"/> <b>10. <input type="checkbox"/> Information Disclosure Statement (IDS) /PTO</b>		<input type="checkbox"/> Copies of IDS Citations	
11. <input checked="" type="checkbox"/> Preliminary Amendment			
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(should be specifically itemized)</i>			
<input type="checkbox"/> <b>13. <input type="checkbox"/> *Small Entity Statements (PTO/sb-09-12)</b>		<input type="checkbox"/> Statement filed in prior application. <i>Status still proper and desired.</i>	
14. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>			

\* Note for Items 1 & 13: In order to be entitled to pay small entity fees, a small entity statement is required (37 CFR §1.27), except if one filed in a prior application is relied upon (37 CFR §1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment  
 Continuation     Divisional     Continuation-in-part (CIP)    of prior applications: 10/313,746 filed Dec. 6, 2002; which is a continuation of U.S. Patent No. 6,559,668, which is a continuation of U.S. Patent No. 6,034,533. Prior application information: Examiner \_\_\_\_\_ Group No./Art Unit \_\_\_\_\_  
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17 CORRESPONDENCE ADDRESS**

<input type="checkbox"/> Customer Number or Bar Code Label		(Insert customer number or attach bar code label here)			or <input checked="" type="checkbox"/> Correspondence address below	
Name	Kevin L. Russell					
Address	601 SW Second Ave., Suite 1600					
City	Portland	State	OR	Zip Code	97204-3157	
Country	USA	Telephone	(503)227-5631	FAX	(503)228-4373	
Name (print type)	Kevin L. Russell		Registration No.	38,292		
Signature				Date	July 7, 2003	

**CERTIFICATE OF MAILING  
BY EXPRESS MAIL**

Express Mail No.: EL 915420658 US

Date of Deposit: July 7, 2003

I hereby certify that the patent application attached hereto entitled **LOW-CURRENT POGO PROBE CARD**, Tervo, et al., inventors, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and is addressed to: MAIL STOP PATENT APPLICATION, The Honorable Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313 on the date stated above.



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Kevin L. Russell

07/07/03



# FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37CFR 1.27

TOTAL AMOUNT OF PAYMENT \$790

Complete If Known

Application Number	
Filing Date	Concurrently herewith
First Named Inventor	Tervo, et al.
Examiner Name	

Art Unit

Attorney Docket No. 1016.2010

## METHOD OF PAYMENT (check all that apply)

 Check  Credit Card  Money Order  Other  None
 Deposit Account

Deposit Account Number

03-1550

Deposit Account Name

Chernoff Vilhauer McClung &amp; Stenzel

The Commissioner is authorized to: (check all that apply)

Charge fees indicated below  Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge any fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Code (\$)	Code (\$)		
1001 750	2001 375	Utility filing fee	750
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
<b>SUBTOTAL (1)</b>			<b>\$750</b>

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

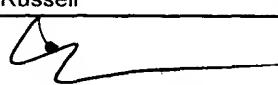
Total Claims	14	- 20	**= 0	x 18 = 0	Fee Paid
Indep. Claims	3	- 3	**= 0	x 84 = 0	
Multiple Dependent					

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	**Reissue independent claims over original patent
1205 18	2205 9	*Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>		<b>\$0</b>

\*\*or number of previously paid, if greater. For reissues, see above.

## FEE CALCULATION (continued)

3. ADDITIONAL FEES	
Large Entity	Small Entity
Fee Code	Fee Code (\$)
1051	130
2051	65
1052	50
2052	25
1053	130
1812	2,520
1804	920*
1805	1,840*
1251	110
1252	410
1253	930
1254	1,450
1255	1,970
1401	320
1402	320
1403	280
1451	1,510
1452	110
1453	1,300
1501	1,300
1502	470
1503	630
1460	130
1807	50
1806	180
8021	40
1809	750
1810	750
1801	750
1802	900
Other fee (specify)	
* Reduced by Basic Filing Fee Paid	
<b>SUBTOTAL (3)</b>	
\$40	

SUBMITTED BY		Complete (if applicable)		
Name (print type)	Signature	Registration No.	Telephone	
Kevin L. Russell		38,292	(503) 227-5631	July 7, 2003